

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)? No

Number of copies of CRF::

Title :: INTEGRATED RECTIFYING ELEMENT

Attorney Docket Number:: 859063.550

Request for Early Publication? No

Request for Non-Publication? No

Suggested Drawing Figure::

Total Drawing Sheets:: 1

Small Entity? No

Petition included? No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.? No

### First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	France
Status::	Full Capacity
Given Name::	Jérôme
Middle Name::	
Family Name::	Heurtier
Name Suffix::	
City of Residence::	Tours
State or Province of Residence::	
Country of Residence::	France
Street of mailing address::	2, Allée Jean Roy
City of mailing address::	Tours
State or Province of mailing address::	
Country of mailing address::	France
Postal or Zip Code of mailing address::	37000

## Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	France
Status::	Full Capacity
Given Name::	Arnaud
Middle Name::	
Family Name::	Florence
Name Suffix::	
City of Residence::	Saint Cyr Sur Loire
State or Province of Residence::	
Country of Residence::	France
Street of mailing address::	39, Avenue de la République
City of mailing address::	Saint Cyr Sur Loire
State or Province of mailing address::	
Country of mailing address::	France
Postal or Zip Code of mailing address::	37540

**Third Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: France  
Status:: Full Capacity  
Given Name:: Franck  
Middle Name::  
Family Name:: Galtié  
Name Suffix::  
City of Residence:: Veretz  
State or Province of Residence::  
Country of Residence:: France  
Street of mailing address:: 12, Rue Louise Weiss  
City of mailing address:: Veretz  
State or Province of mailing address::  
Country of mailing address:: France  
Postal or Zip Code of mailing address:: 37270

**Correspondence Information**

Correspondence Customer Number :: **38106**

**Representative Information**

Representative Customer Number::		<b>38106</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
France	02/15320	12/04/02	Yes

**Assignee Information**

Assignee name::	STMicroelectronics S.A.
Street of mailing address::	29, Boulevard Romain Rolland
City of mailing address::	Montrouge
State or Province of mailing address::	
Country of mailing address::	France
Postal or Zip Code of mailing address::	92120